TRANSMITTAL **FORM**

Application Number	10/552,549
Filing Date	7/20/2006
First Named Inventor	Martijn Schimmer
Art Unit	2612
Examiner Name	Jack K. Wang
Attornov Doglest Number	2125 052021

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 11

Total Number of Pages in This Submission	Attorney Docket Number	3135 - 053021
	ENCLOSURES (check all that apply)
Fee Transmittal Form	Drawing(s)	After Allowance communication
Fee Attached	Licensing-related Papers	to TC Appeal Communication to Board of Appeals and Interferences
Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application	Petition Petition to convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): Request for Continued Examination
		itional fees or underpayment of fees
under 37 CFR 1.16 and 1.17 to Dep	posit Account No. 23-0650	
SIGNATUI	RE OF APPLICANT, ATTORNEY, O	OR AGENT
Firm Name The Webb Law	Firm	
Signature	\sim	
Printed Name John W. McIlva	nine	
Date January 26, 200	9 Reg. No. 3	34219
CER	TIFICATE OF TRANSMISSION / MAIL	ING
I hereby certify that this correspondence i	is being electronically transmitted to the US rst class mail in an envelope addressed to:	SPTO or deposited with the United States
Signature Auler	ed. Mys	
Typed or printed name Pauline J. M	loyles	Date January 26, 2009

FEE TRANSMITTAL FOR FY 2009 Application Number 10/552,549 Filing Date 7/20/2006 First Named Inventor Martijn Schimmer Application Number Jack K. Wang Art Unit 2612 TOTAL AMOUNT OF PAYMENT (\$) 960 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on FTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES
Filing Date 7/20/2006 First Named Inventor Martijn Schimmer Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Jack K. Wang Art Unit 2612 TOTAL AMOUNT OF PAYMENT (\$) 960 Attorney Docket 3135 - 053021
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Small Entity Small Entity Small Entity
Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$)
Utility 330 82 540 270 220 110
Design 220 110 100 50 140 70
Plant 220 110 330 165 170 85
Reissue 330 165 540 270 650 325
Provisional 220 110 0 0 0 0
2. EXCESS CLAIM FEES Small Entity
Fee Description Fee (\$)
Each claim over 20 (including Reissues) 52 26
Each independent claim over 3 (including Reissues) 220 110
Multiple dependent claims 390 195
Total Claims - 20 or HP Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims
$\frac{11}{\text{HP} = \text{highest number of total claims paid for, if greater than 20.}} = 0 = 0 = 0$ $\frac{\text{Fee (S)}}{\text{Fee Paid (S)}}$
$\frac{\text{Indep. Claims}}{2} - \frac{3 \text{ or HP}}{3} = \frac{\text{Extra Claims}}{0} \times \frac{\text{Fee (\$)}}{0} = \frac{\text{Fee Paid (\$)}}{0}$
$\frac{2}{\text{HP} = \text{highest number of independent claims paid for, if greater than 3.}}$
3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
Total Sheets
100 = / 50 = (round up to a whole number) x =
4. OTHER FEE(S) Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): RCE-\$405 and Petition for Extension of Time (3-mos.)-\$555 \$960
SUBMITTED BY
Signature Registration No. (Attorney/Agent) 34219 Telephone 412-471-8815
Name (Print/Type) John W. McIlvaine Date January 26, 2009